



APPLICATION FOR RESTRICTED AGRICULTURAL COMMERCIAL DRIVER'S LICENSE

State Form 48440 (R3 / 8-07) / Formerly CDL-AG

Approved by State Board of Accounts, 2007

BUREAU OF MOTOR VEHICLES

INDIANA BUREAU OF MOTOR VEHICLES
100 North Senate Avenue, Room N405
Indianapolis, IN 46204-2274

* This agency is requesting disclosure of your Social Security Number in accordance with IC 9-24-9-2; disclosure is mandatory and this record cannot be processed without it.

- INSTRUCTIONS:**
1. Please print and complete this entire application in ink.
 2. A DOT/CDL medical examination form must accompany this application, unless already on file with the Bureau of Motor Vehicles.
 3. First-time applicants must take and pass the written General Knowledge test. The written test certificate must accompany this application.
 4. The fee for a Restricted Agricultural Commercial Driver's License is \$30.00, payable to the Bureau of Motor Vehicles.
 5. Only one check or money order per driver is acceptable; cash is not acceptable. Please include the driver's name.
 6. Mail the completed application and payment to the Bureau of Motor Vehicles at the above address.
 7. The AG CDL is a four (4) year restricted license. You must submit an application every four (4) years.

Upon acceptance of this application, the Bureau of Motor Vehicles will issue a Restricted Agricultural Commercial Driver's License (AG CDL), which is limited to usage during the seasons April 02 through June 30, and September 02 through November 30.

The AG CDL is valid when accompanied by a valid Indiana Operator, Chauffeur, or Public Passenger Chauffeur License. The applicant must have a current DOT/CDL medical examination form on file with the Bureau of Motor Vehicles or submit one with this application. In addition, the applicant must carry either an original or a copy of the medical examiner's certificate at all times while operating a commercial motor vehicle that requires the AG CDL. Thirty (30) days prior to each season, the Bureau of Motor Vehicles will check each applicant's driving record to ensure that there have been no disqualifying or serious offenses for the past two (2) years. Notification will be sent by mail if the applicant is disqualified.

The AG CDL is valid for custom harvesters, farm retail outlets and suppliers, agri-chemical businesses, and livestock feeders.

Restricted AG CDL holders may not operate a commercial motor vehicle beyond 150 miles from the place of business or farm being served. The restricted AG CDL is limited to Class B and Class C vehicles.

- Class A Vehicles - *Not covered under this waiver* - Include combination vehicles with a gross combination weight rating of 26,001 pounds or more (inclusive of a towed vehicle with a gross vehicle weight rating (GVWR) over 10,000 pounds). All drivers of these vehicles need to satisfy the knowledge and skills testing requirements of the standard Commercial Driver's License and applicable endorsements
- Class B Vehicles - Include any single vehicle with a GVWR of 26,001 pounds or more (the single vehicle may tow another vehicle providing the vehicle being towed does not have a GVWR in excess of 10,000 pounds).
- Class C Vehicles - Include any vehicle that does not meet the thresholds for Class A or B, but is either originally designed to transport sixteen (16) or more passengers, including the driver, or is required to be placarded for hazardous materials.

IMPORTANT NOTICE

For the transport of hazardous materials requiring placarding, restricted AG CDL holders are strictly limited to:

- Diesel fuel in quantities of 1,000 gallons or less;
- Liquid fertilizers in vehicles with total capacities of 3,000 gallons or less; and
- Solid fertilizers that are not transported with any organic substance

No other placarded hazardous material may be transported by holders of AG CDLs.

Restricted AG CDL holders are fully subject to all CDL disqualifications and penalties (see CDL manual for all Disqualifications and penalties).

Name of applicant (<i>last, first, middle initial</i>)			Telephone number ()
Current address (<i>number and street, city, state, and ZIP code</i>)			
Date of birth (<i>month, day, year</i>)	Social Security Number	Driver license number	Date of license expiration (<i>month, day, year</i>)
Name of company			Telephone number of company ()
Signature of company representative			Date (<i>month, day, year</i>)

I certify that during the two (2) year period immediately prior to this date in Indiana or any other state:

1. I have possessed a valid driver's license for a period of at least one (1) full year.
2. I have not possessed more than one (1) driver's license at a time.
3. I have not had any license suspended, revoked, cancelled, or disqualified.
4. I have not been convicted in any type of motor vehicle for:
 - a. Driving while intoxicated, driving while under the influence of alcohol (includes a blood alcohol level (BAC) of .08% or higher), or driving under the influence of a controlled substance.
 - b. Leaving the scene of an accident.
 - c. A felony involving the use of a commercial motor vehicle.

I have not been convicted for any of the following in any type of motor vehicle:

- Reckless driving
- A moving violation in connection with a fatal accident
- Improper lane changes
- Following too closely
- Speeding fifteen (15) or more miles per hour over the posted speed limit
- I have no record of an "At Fault" accident
- Violation of state law or county or municipal ordinance relating to the operation of any type of motor vehicle in connection with an accident.

I understand that a false statement on this application could be cause for a one (1) year suspension of all my driving privileges.

Signature of applicant	Date (<i>month, day, year</i>)
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